



## **MO HEALTHNET DIVISION PROVIDER BULLETIN**

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### **National Provider Identifier**

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#### **National Provider Identifier**

The National Provider Identifier (NPI) is a Health Insurance Portability and Accountability Act (HIPAA) Administrative Simplification Standard. The NPI is a unique identification number for covered health care providers. This regulation requires the use of only an NPI as the provider identifier on all HIPAA standard transactions by May 23, 2008. As outlined in the HIPAA Regulation, covered providers must also share their NPI with other providers, health plans, clearinghouses, and any entity that may need it for billing purposes. If you are a health care provider, you definitely need an NPI. If you bill the MO HealthNet Program for health care services as a billing provider or you are reported on a claim as a performing provider, you must report your NPI to MO HealthNet so a crosswalk can be created from your NPI to your legacy provider identifier.

**Failure to report your NPI(s) to MO HealthNet will result in denied claims and the inability to submit transactions.**

## **NPI Contingency Plan**

**The MO HealthNet Program will end its NPI contingency plan and implement full use of the NPI for all claims processing immediately following the close of the financial cycle on Friday, May 9, 2008.** As required by federal regulation, all HIPAA standard transactions must reflect only an NPI as the provider identifier by May 23, 2008.

For X12N 837 Health Care Claims and direct data entry claims submitted on the MO HealthNet Billing Web site at [www.emomed.com](http://www.emomed.com), the financial cycle will close at 5:00 p.m. on Friday, May 9, 2008. All X12N 837 batch claims received after the financial cycle closes must include only an NPI as the provider identifier and will be processed no later than Monday, May 12, 2008.

For Point of Service (POS) claims, the financial cycle will close at 12:00 midnight on Saturday, May 10, 2008. There will be no delay in processing POS claims. This transaction will be immediately switched to accept only an NPI as the provider identifier.

Paper claims received by MO HealthNet on or after Monday, May 12, 2008 must report an NPI as the provider identifier. Paper claims received without an NPI will be returned. Based on current mailing patterns, all paper claims mailed to MO HealthNet after Friday, May 2, 2008 should contain an NPI as the provider identifier to ensure that claims received on or after Monday, May 12, 2008 have the required NPI as the provider identifier.

## **MO HealthNet Billing Web Site**

The MO HealthNet Billing Web site at [www.emomed.com](http://www.emomed.com) will be unavailable for use starting at 5:00 p.m. on Friday, May 9, 2008, to allow for implementing necessary changes for the full use of the NPI. Access to this Web site will become available again no later than Monday, May 12, 2008.

## **NPI Verification**

Prior to the full NPI implementation, individual providers or provider administrators, as registered on the MO HealthNet Billing Web site, may use the **Add/View NPI** function to verify MO HealthNet has received their NPI and crosswalked it to the appropriate legacy provider identifier.

## **NPI Provider Notifications**

MO HealthNet has issued numerous provider notifications to their active providers requesting submission of NPIs for addition to the Provider Master File. However, there are still a number of providers that have not submitted their NPI(s) to MO HealthNet. The current notification campaign involves searching the NPI Registry for NPIs and faxing or mailing letters to providers for verification that the identified NPIs will be used on future claims submitted to MO HealthNet. Upon receipt of provider verification, the NPI will be added to the appropriate Provider Master File. The NPIs are being used to build a "crosswalk" from the NPI to the MO HealthNet legacy provider identifier for all future health care claims processing.

## **NPI Submission to MO HealthNet**

Submitting an NPI to MO HealthNet may be done several ways as described below:

- If submitting one NPI for one legacy provider identifier to build a one-to-one crosswalk, individual providers or provider administrators, as registered on the MO HealthNet Billing Web site, should use the **Add/View NPI** function at [www.emomed.com](http://www.emomed.com). To change an NPI which was entered incorrectly, providers must fax a letter providing the correct NPI to the Provider Enrollment Unit at 1-573/526-2054. **The Add/View NPI function will not be available after NPI is implemented by MO HealthNet as the legacy provider identifiers will no longer be displayed.**
- If a provider organization desires to submit a significant number of NPIs in a batch submission format to build a one-to-one crosswalk, providers must contact the Infocrossing Technical Help Desk at 1-573/635-3559 for assistance.
- If submitting one NPI for multiple active legacy provider identifiers, providers must fax a letter explaining the reason for the one NPI to many provider identifiers association, their National Plan & Provider Enumeration System (NPES) approval letter (which includes their NPI and Provider Taxonomy Codes), and a list of the associated MO HealthNet provider identifiers with the applicable Provider Taxonomy Code for each provider identifier to the Provider Enrollment Unit at 1-573/526-2054. This information is required to build a one-to-many crosswalk.

Providers not reporting their NPI(s) to MO HealthNet prior to the NPI implementation, will be required to fax their NPI information directly to the MO HealthNet Provider Enrollment Unit. These requests will be processed in order by date received. Providers will not be allowed to submit their NPI on the MO HealthNet Billing Web site.

## **How Many NPIs Does A Health Care Provider Need**

There may still be some confusion when it comes to how many NPIs an individual health care provider or health care organization needs to obtain. Per the NPI Final Rule, each entity who meets the definition of a health care provider is eligible for an NPI.

Individual health care providers such as dentists, physicians and therapists may receive, and in most cases, use only one NPI. If the individual health care provider also has a business under the same name (for example, a clinic), the same NPI can be used to identify their business on all claims submitted to all payers. (MO HealthNet would build a one-to-many crosswalk.) The following individual MO HealthNet provider types (PT) are eligible to obtain one NPI.

| <b>Provider Type</b>                           | <b>Provider Type</b>           |
|--|--------------------------------|
| Advanced Practice Nurse (PT 42)                | Occupational Therapist (PT 47) |
| Audiologist (PT 33)                            | Optometrist (PT 31)            |
| Certified Registered Nurse Anesthetist (PT 91) | Physical Therapist (PT 48)     |
| Dental Hygienist (PT 74)                       | Physician (PT 20 and 24)       |
| Dentist (PT 40)                                | Podiatrist (PT 30)             |

|                                     |   |
|-------------------------------------|---|
| Disease Management Provider (PT 35) | Psychologist, Licensed Professional Counselor, Licensed Clinical Social Worker (Includes provisionally licensed) (PT 49)                |
| Hearing Aid Specialist (PT 34)      | QMB-Only Services (PT 75)   |
| Nurse Midwife (PT 25)               | Speech/Language Therapist (PT 46) [Unless only certified by Department of Elementary & Secondary Education (DESE) for School Districts] |

Organization health care providers (such as hospitals, clinic and others) may be made up of separate components referred to as subparts, which may be separately certified or licensed by the state. These providers are required to obtain NPIs for their subparts that would otherwise meet the test of being a covered health care provider themselves if they were separate legal entities. For example, a hospital may have subparts which include an ambulance service, multiple clinics, and a home health service. Per the Final Rule, each separate component or subpart should have its own NPI. Following is a list of MO HealthNet organization health care provider types. MO HealthNet strongly encourages these health care providers to obtain an NPI for each of the different physical locations, components or subparts.

| Provider Type                                | Provider Type   |
|--|---|
| Adult Day Health Care (PT 29)                | Mental Hospital (PT 02)                                   |
| Ambulance (PT 80)                            | MR/DD Waiver (PT 85)                                      |
| Case Management (PT 18)                      | Nursing Home (PT 10)                                      |
| Community Mental Health Center (PT 56)       | Optician/Optical Company (PT 32)                          |
| Community Psychiatric Rehabilitation (PT 87) | Pharmacy (PT 60)  |
| Comprehensive Rehab (PT 76)                  | Planned Parenthood Clinic (PT 52)                         |
| C-STAR Program (PT 86)                       | Private Duty Nursing (PT 94)                              |
| Durable Medical Equipment Supplier (PT 62)   | Program for All-Inclusive Care for Elderly (PACE) (PT 89) |
| Federally Qualified Health Center (PT 50)    | Public Health Department Clinic (PT 51)                   |
| General Hospital (PT 01)                     | Rehabilitation Center (PT 57)                             |
| HCY Screener (PT 45)                         | Rural Health Clinic (PT 59)                               |
| Home Health Agency (PT 58)                   | State Institution (PT 05)                                 |
| Hospice (PT 82)                              | Targeted Case Management – MR/MI (PT 15)                  |
| Independent Clinic (PT 50)                   | Targeted Case Management – Foster Care (PT 17)            |
| Independent Laboratory (PT 70)               | Teaching Institution (PT 55)                              |
| Independent X-Ray Service (PT 71)            | Teaching Institution Department (PT 54)                   |

### **Atypical Service Provider**

The NPI Final Rule stipulates that only entities who meet the definition of a health care provider are eligible for NPIs. There are providers who do not meet this definition and who are therefore not eligible for NPIs, but whose services are payable by MO HealthNet. In many cases, these providers submit their claims to MO HealthNet using the standard transactions, and identify themselves by the legacy provider identifiers assigned to them by MO HealthNet. The NPI Final Rule refers to these entities as “atypical service providers” because the services they render are not “health care” services. The following provider types may be considered atypical service providers and therefore, not eligible for NPIs.

| Provider Type                                | Provider Type  |
|--|--|
| Aged & Disabled Waiver Services (PT 28)      | Personal Care (PT 26)  |
| HCY Lead Environmental Assessment (PT 39)    | Speech/Language Therapists with only certification through DESE for School Districts (PT 46) |
| Non-Emergency Medical Transportation (PT 65) |  |

If the provider types listed above have obtained an NPI, it must be reported to MO HealthNet as soon as possible. In instances where the providers do not obtain an NPI, MO HealthNet will assign a ten-digit "Atypical Provider Identifier" for use on MO HealthNet claims only. Written notification will be sent to the atypical providers advising of their MO HealthNet Atypical Provider Identifier prior to May 1, 2008. The new atypical provider identifier will be used to build the crosswalk to their MO HealthNet legacy provider identifier.

### **One NPI to Many Legacy Provider Identifiers**

If an organization provider or an individual provider associated with a business by the same name, is using one NPI for multiple legacy provider identifiers, use of Provider Taxonomy Codes on all transactions **will be required** to perform the proper crosswalk from the NPI to the legacy provider identifiers. Providers must report the appropriate designated Provider Taxonomy Codes on all future submissions (except for Pharmacy claims – provider taxonomy not included on a drug claim) to ensure the correct crosswalk is performed. If a Provider Taxonomy Code other than the one(s) reported to MO HealthNet is utilized, claims cannot be crosswalked to the correct legacy provider identifier and claims will deny or pay incorrectly.

For a complete list of the Provider Taxonomy Codes, please visit the Washington Publishing Company Web site at [www.wpc-edi.com](http://www.wpc-edi.com).

### **Multiple Identifiers**

MO HealthNet providers may be required to obtain multiple, separate NPIs based on Medicare certification requirements. For example, a hospital may be required to obtain separate NPIs for their psychiatric, rehabilitation or skilled nursing units. Whereas, MO HealthNet requires hospital providers to obtain only one NPI for the main hospital and all its units. MO HealthNet pays all inpatient and outpatient hospital services under one hospital MO HealthNet provider identifier (PT 01), even though the units in the hospital may have separate Medicare numbers. NPI usage for MO HealthNet will remain the same. The NPI for the main hospital must be submitted in association with the hospital's "01" legacy provider identifier to build the proper crosswalk to ensure correct claims processing. The services billed for the hospital units will continue to process under the main hospital NPI.

A list of the additional NPIs, the applicable Medicare certification, and a copy of the appropriate NPI documentation for each hospital unit must be faxed to the MO HealthNet's Provider Enrollment Unit at 1-573/526-2054. These NPIs will be added to the Provider Master File as additional Medicare identifiers for the provider to ensure Medicare claims will crossover properly to MO HealthNet.

If the hospital has a MO HealthNet legacy provider identifier established for one or more departments within the hospital for professional services or the hospital owns clinics that have their own Medicare/MO HealthNet provider identifiers, the department and clinic NPIs must be submitted to MO HealthNet for association with the appropriate MO HealthNet legacy provider identifiers.

### **Incoming Claims and Inquiries**

Prior to full NPI implementation, ASC X12N 837 claims transaction and paper claims may be submitted to MO HealthNet with only an NPI as the provider identifier; however, the provider is strongly encouraged to also submit the corresponding MO HealthNet legacy provider identifier. Use of both identifiers facilitates investigation of errors if one identifier or the other cannot be located in the MO HealthNet Provider Master File or NPI crosswalk file. This capability does not apply to the MO HealthNet Billing Web site at [www.emomed.com](http://www.emomed.com).

For the 837 claims transaction, when an NPI is reported for a billing or pay-to provider, a TIN (tax identification number) must also be submitted in addition to the provider's legacy identifier, as required by the 837 Implementation Guides.

Claims will be denied if:

- The NPI included in a claim or claim status request does not meet the content criteria requirements for a valid NPI.
- The reported NPI cannot be located in the MO HealthNet Provider Master File or NPI crosswalk file.
- The NPI is located, but a legacy provider identifier reported for the same provider in the transaction does not match the legacy provider identifier in the MO HealthNet NPI crosswalk file for the reported NPI.

### **NPI Validation**

Upon full NPI implementation, it will be MO HealthNet's responsibility to ensure all submitted claims (both electronic and paper) contain an NPI – not a legacy provider identifier, and ensure that the NPIs received are valid. However, valid NPIs, like the provider identifiers used today, must be "known" to MO HealthNet. Payment will not be made for services rendered by unidentifiable or inactive providers.

### **Reporting NPIs on Remittance Advices**

Prior to the second financial cycle in May, 2008 (set for May 23, 2008), a systematic change will be made and only the NPI will be reported on all Remittance Advices (RAs) (includes paper and all electronic versions). If claims are processed for an active provider that has not yet reported their NPI to MO HealthNet, the RA will be produced in paper form and mailed to the provider until an NPI is added to the MO HealthNet Provider Master File. Providers ready to receive the NPI on their RAs prior to this financial cycle should contact the Infocrossing Technical Help Desk at 1-573/635-3559 to request the change.

If a MO HealthNet organization provider is using one NPI for multiple MO HealthNet legacy provider identifiers, multiple RAs will be received by the provider. The internal MO HealthNet claims processing system will continue to process claims based on the multiple legacy provider identifiers and therefore, separate RAs will be generated. However, each RA will reflect the same NPI.

**Provider Bulletins** are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

**MO HealthNet News:** Providers and other interested parties are urged to go to the MHD Web site at <http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

**MO HealthNet Managed Care:** The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One.

**Provider Communications Hotline**  
**573-751-2896**